



PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0851-0032
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Effective on 12/08/2004,
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 1818).

FEE TRANSMITTAL

For FY 2006

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	180.00
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Complete if Known	
Application Number	10/538,459
Filing Date	June 10, 2005
First Named Inventor	BOYD, Robert R., et al.
Examiner Name	
Art Unit	
Attorney Docket No.	22198(2)US

METHOD OF PAYMENT (check all that apply)

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☐ Deposit Account Deposit Account Number: _____ Deposit Account Name: _____

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims **Extra Claims** **Fee (\$)** **Fees Paid (\$)**

_____ - 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims **Extra Claims** **Fee (\$)** **Fees Paid (\$)**

_____ - 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
_____	_____	_____ / 50 = _____ (round up to a whole number) x _____	_____	_____

4. OTHER FEE(S)

Description	Fee (\$)	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): IDS		
		\$180.00

SUBMITTED BY

Signature	<i>C. Michael Gegenheimer</i>	Registration No. (Attorney/Agent)	33,387	Telephone	614.424.4293
Name (Print/Type)	C. Michael Gegenheimer	Date	12/4/06		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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12/15/2006 SSESHE1 00000001 10538459 180.00 DP 01 FC:1806



PTO/BB/21 (09-03)

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FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/538,459
Filing Date	June 10, 2005
First Named Inventor	BOYD, Robert R., et al.
Art Unit	
Examiner Name	
Attorney Docket Number	22188(2)US

ENCLOSURES (Check all that apply)

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input type="checkbox"/> Fee Attached
<input type="checkbox"/> Amendment/Reply
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
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<input checked="" type="checkbox"/> Reply to Missing Parts/
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under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)
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2) Copy of Internet Article (Cite No. C1, Page 3 of IDS) "How Maplayer Devices Work..."

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Battelle Memorial Institute		
Signature			
Printed name	C. Michael Gegenholmer		
Date	12/04/2006	Reg. No.	33,387

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as ~~first class~~ mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Express

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C MICHAEL GEGENHEIMER ESQ
BATTELLE MEMORIAL INSTITUTE
505 KING AVENUE
COLUMBUS OH 43201-2693

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Kindly acknowledge receipt of the accompanying (1) Transmittal; (2) Fee Transmittal Form (In Duplicate); (3) IDS; (4) Copy of Article; (5) Credit Card Form; and (6) and Postcard for:

Inventors: Robert R. Boyd, et. al.

Serial No.: 10/538,459

Filed: Herewith

For: ARTICULATED ELEMENTS AND METHODS FOR USE

by placing hereon your receiving date stamp and returning.

Respectfully submitted,

was signed by CMG

C. Michael Gegenheimer, 33,387
December 4, 2006